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**CONFIRMATION NO. 8395** 

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Liquan Hua Minqing Ro Marianna M Cristian A. I ** CONTINUING I This appln o	ang, Nong, B Max, N Perez DATA claim	olskee, Upper Montclair New Haven, CT; Brooklyn, NY; West Orange, NJ; z, New York, NY; a ************************************	* 1 04/17/2						
Foreign Priority claimed yes no  35 USC 119 (a-d) conditions yes no Met after Allowance  Verified and Acknowledged Examiner's Signature Initials				STATE OR COUNTRY NJ	DRA	SHEETS TOTA RAWING CLAIN 18 23		MS	INDEPENDENT CLAIMS 15
ADDRESS MICHAEL L. GOL NIXON PEABODY 1100 CLINTON SOR ROCHESTER, NY TITLE A METHOD OF IE	DMAY LLF QUA Y146	RE 04 FIFYING BITTER COM				RP8, A	TRANSI	ENT I	RECEPTOR
POTENTIAL CHA	OTENTIAL CHANNEL EXPRESSED IN TASTE RECEPTOR CELLS  All Fees								
RECEIVED	VED No to charge/credit DEPOSIT ACCOUNT					1.16 Fees (Filing)  1.17 Fees (Processing Ext. of time)  1.18 Fees (Issue)  Other  Credit			